

Form CPF M 102: Campaign Finance Report

Municipal Form
Office of Campaign and Political Finance

CITY OF CAMBRIDGE

Please print or type all information, except signatures. Fill in dates: Month Date Year Month Date Year Reporting Period Beginning 10 27 07 Ending 17 37 07 Type of report: (Check one)	Massachusette	EEE ON TO WE WANTED
Type of report: (Check one) Sth day preceding preliminary Sth day preceding election 30 day after election Qyear-end report dissolution	le with: ty or Town Clerk or Election Commission Please print or type all information, except signature	1 2008 JAN 22 P 2 11
Stefan Mainer Full Name of Candidate (if applicable) School Committee Name Office Sought and District 31 Window St #3 Residential Address Tel. No. (optional) SUMMARY BALANCE INFORMATION: Line 1: Ending balance from previous report Line 2: Total receipts this period (page 2, line 11) Line 3: Subtotal (line 1 plus line 2) Line 4: Total expenditures this period (page 3, line 14) Line 5: Ending balance (line 3 minus line 4) Line 6: Total in-kind contributions this period (page 4) Line 7: Total (all) outstanding liabilities (page 4) Line 8: Name of bank(s) used Committee Treasurer: 1 certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipte, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity, including all contributions the subtority or one behalf of this committee in accordance with the requirements of MGL c. 55. Signed under the penalties of perjury: Por Candidate (in applicable) Candidate (in applicable)		
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	FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUS	ST SIGN BELOW)
	Construction and the second of	

Affidavit of Candidate: (check 1 box only)	
Candidate with Committee and no activity independent of the committee	
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and b	elief, a true and complete statement of all campaign
finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the recommendation	quirements of M.G.L. c. 55. I have not received any
contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.	
Candidate without Committee OR Candidate with independent activity filling separate report	
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and b	elief, a true and complete statement of all campaign
finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and li	abilities for this reporting period and represents the
campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with	th the requirements of M.G.L. c. 55.
Signed under the penalties of perjury:	, ,
Stefan M.L.	1/22/2008
Candidate algusture (in juk)	Date

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page number on each page.

Date Received	Name and Residential Address (alphabetical listing required)	Amo	ount	Occupation & Employer (for contributions of \$200 or more)
Line 9:	Total receipts in excess of \$50 (or listed above)			
Line 10:	Total receipts \$50 and under* (not listed above)			
The same of the same of	TOTAL RECEIPTS IN THE PERIOD	0		Enter on page 1, line 2

^{*} If you have itemized receipts of \$50 and under include them in line 9. Line 10 should include only those receipts not itemized above.

Page 2

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amo	unt
	0872 371				
			Expenditures over \$50		
			Expenditures \$50 and under*		
E	Enter on page 1, line 4	Line 14:	TOTAL EXPENDITURES	O	

^{*}If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

Page 3

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
		Line 15:	In-kind over \$50	
		Line 16:	In-kind \$50 and under	
	Enter on page 1, line 6	Line 17:	Total In-kind	0

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address Purpose	Amount
	Enter on page 1, line 7	Line 18: OUTSTANDING LIABILITIES (ALL)	0